



2012 HIGH SCHOOL SUMMER CAMP June 24-30, 2012 CADET CHECKLIST

THESE FORMS SHOULD BE FILLED OUT IN FULL AND RETURNED TO KATHY WALKER, MINNESOTA STATE PATROL TRAINING AND DEVELOPMENT SECTION, 1900 WEST COUNTY ROAD I, SHOREVIEW, MN 55126 NO LATER THAN MAY 18, 2012.

The final package should contain the following, if you fail to submit the complete package, it will be returned to you or you may not be accepted.

1. Cadet application form, with all signatures filled in.
2. Letter of Recommendation from teacher/principal or career counselor. This letter should include information about your involvement in high school activities and/or community involvement.
3. Permission from parent /guardian (Certificate of Approval). Everyone must submit this form, even those who are 18 or 19 and are of legal age.
4. Complete and sign the Driver License/Criminal History Release Form. **If you are under age 18 a parent/guardian must sign the Release.** Your records will be checked as part of the application process.
5. Complete and sign the Voice, Video and Image Release. **If you are under 18 a parent/guardian must sign the Release.**
6. A one page essay from the applicant stating why they are interested in the area of law enforcement and why they should be selected for the cadet program.
7. A one page essay answering the following question: What qualities and/or characteristics do you possess that would make you a good police officer?
8. Copy of last semester grades.

Essays and grade points will be used in the selection process.

QUALIFICATIONS FOR THE PROGRAM ARE AS FOLLOWS:

1. 16 -19 years of age.
2. 2.0 or higher grade point average.
3. Enrolled in high school (10th, 11th, and 12th grade) or recent high school graduate. Students cannot already be attending college full time.
4. No criminal record.
5. Interest in law enforcement.
6. Permission from the parent or guardian.
7. Physically able to participate in activities.

MINNESOTA STATE PATROL

2012 High School Summer Camp

PURPOSE

The purpose of the Summer Camp is to help young people gain knowledge regarding the training and responsibilities of law enforcement officers. Leadership skills (confidence building) will also be stressed.

WHEN AND WHERE

The 2012 High School Summer Camp will run from June 24-30. Cadets will be expected to arrive at the Education Center at Camp Ripley in Little Falls, MN on Sunday, June 24. They should arrive at 5:00 p.m. for registration and orientation. Parent(s) should accompany applicant and attend the orientation. Dinner will be served to cadets after orientation and the departure of the parents. The camp will conclude with a Graduation Ceremony at 10:00 a.m. on Saturday, June 30. Families should attend the Graduation Ceremony on Saturday and cadets will then be released. Camp Ripley is located at 15008 Hwy. 115, Little Falls, MN.

TRAINING

Every cadet receives training in firearms, defensive driving, youth and alcohol, history of law enforcement, laws of arrest, radar/aircraft enforcement, fitness/wellness, crash investigation, defensive tactics and responsibilities of the citizens of the state. Cadets will learn important leadership skills and be involved in discussion on cultural differences, peer pressures and core values. Physical fitness training will be conducted each day and involve activities that increase self-confidence and promote team building.

The Core Values of Respect, Integrity, Courage and Honor will be incorporated throughout the training. It will be the responsibility of each cadet to embrace and demonstrate these values throughout all daily interactions.

INSTRUCTION

Qualified instructors are used in all areas of training. The instructors are from the Minnesota State Patrol and other agencies. All are skilled in the many phases of law enforcement. All classes are interactive and each cadet will have the opportunity to participate in each phase of training.

ACCOMMODATIONS

Accommodations are provided. They include sleeping rooms with restroom and shower facilities, a large dining room and classrooms. Outside areas for recreation are also utilized. The Camp will furnish sheets, pillows, blankets and towels.

FOOD

A balanced diet of good, wholesome food is provided. Table manners are stressed. Meals will be served to cadets beginning on Sunday evening.

PERSONAL APPEARANCE

A neat appearance will be stressed throughout the week. Each cadet should have a well groomed appearance. A State Patrol shirt and hat will be provided to each cadet to be worn during this camp. Clean jeans or slacks will be worn during the week with a belt securing the pants or slacks. All clothing should be neat with no inappropriate advertising. Pants/slacks should not have holes or frayed edges.

WHAT TO BRING

Each cadet will bring his/her own personal toiletry articles, sunscreen and insect repellent. Gym clothing will be needed for outdoor physical fitness training (shorts are not permitted except for physical training).

No laundry facilities are available to cadets so they must bring an adequate supply of clothing for the entire week. The State Patrol shirt which will be issued to cadets will be laundered during the week by staff. You may bring a cell phone but all cell phones will be turned into the staff counselors on Sunday and may be used only during time allotted by staff. Cell phones will not be retained by cadets during their stay at Camp Ripley.

Water will also be supplied during the camp.

WHAT NOT TO BRING

Do not bring food or money. Do not wear an excessive amount of jewelry. You should not bring any type of pocket knife or item that could be considered a weapon. Do not bring iPods, MP3 players or laptops.

SELECTION PROCESS

The final selection will be made by a committee of members from the Minnesota State Patrol Training and Development Section. Applicants will be notified by email.

QUESTIONS

If interested persons have further questions or need additional applications they should contact Kathy Walker (651) 757-1902.

MINNESOTA STATE PATROL
2012 High School Summer Camp Application
June 24-30, 2012

APPLICATION: to be completed personally by the applicant. MUST BE COMPLETED IN FULL TO BE ELIGIBLE FOR CONSIDERATION. Please print in ink. You must also attach the other required documentation listed in the enclosures.

Complete Name _____
(last) (first) (middle name)

Home Phone # _____

Work Phone # _____

Cell Phone # _____

Email address _____

Date of Birth ____/____/____ Drivers License # _____

Mailing Address _____

City _____ State _____ Zip _____

Parent/Legal Guardian _____

Health Insurance Carrier _____

Policy or Group # _____

High School and Address _____

Activities (School, Church, sports, clubs) _____

T-Shirt Size (circle one) Small Medium Large X-Large XX-Large

Height _____ Weight _____ Sex _____

Transportation: Each cadet is to provide their own. (Keep in mind that Camp Ripley will not be prepared to house any cadet until 5:00 P.M. on Sunday.) If you are experiencing difficulty or hardship with your own transportation, contact the Training and Development Section at 651/757-1906.

Signature of Cadet _____ Date _____

Signature of Parent or Legal Guardian _____ Date _____

SCHOOL ENDORSEMENT: With Letter of Recommendation (Must be completed by High School Principal/Teacher or Career Counselor).

I hereby certify that the above student is a member in good standing or a recent graduate from _____ High School. I recommend active participation in the High School Summer Camp, sponsored by the Minnesota State Patrol.

Signature of High School Principal/Teacher/Counselor

Date

PLEASE USE THIS SPACE FOR YOUR LETTER OF RECOMMENDATION OR ATTACH A SEPARATE SHEET. THIS RECOMMENDATION SHOULD INCLUDE, WHY YOU BELIEVE THIS STUDENT IS A GOOD CANDIDATE FOR PARTICIPATION IN THIS PROGRAM, YOUR INVOLVEMENT WITH THE STUDENT AND HIS/HER INVOLVEMENT IN SCHOOL ACTIVITIES OR COMMUNITY ACTIVITIES.

Return this form to the Minnesota State Patrol Training and Development Section,
1900 West County Road I, Shoreview, MN 55126.
Include this with your Application Form/Waiver.

MINNESOTA STATE PATROL
2012 High School Summer Camp
June 24-30, 2012

PARENT/LEGAL GUARDIAN'S CERTIFICATE OF APPROVAL

During the week your son/daughter is attending the Minnesota State Patrol Summer Camp they will be given the opportunity to observe the State Patrol's vehicle enforcement program. They will be allowed to fly in the Patrol's aircraft, and ride in a squad car. They will be participating in physical fitness training. If they are a minor they will need your permission. If they are of legal age they need your recommendation. Please sign the following or indicate **NO** that my son/daughter may not participate or is recommended to participate. Also, please let us know if your son/daughter has any medical problems that we need to be aware of.

Applicant's Name

has my permission/recommendation to participate in the State Patrol High School Summer Camp Program.

It is agreed that the Minnesota State Patrol, the Department of Public Safety, its officers or their representatives shall not be liable for injury to applicants participating in activities under their supervision.

Are there any medical needs or concerns that State Patrol staff should be aware of while the cadet is attending the Camp?

YES _____ NO _____

If yes, please describe: _____

WAIVER OF CLAIMS

I, _____, of _____
Parent/Legal Guardian Name *Address*
allow _____ to ride in a Department of Public Safety, State
Applicant's Name
Patrol vehicle/aircraft. I agree that the State of Minnesota will not be liable for any damage or injury that may be sustained by _____ while riding as a passenger in said
Applicant's Name
State Patrol vehicle/aircraft whether or not said damage or injury should be caused by or be due to negligence of the State of Minnesota, its agents, servants or employees.

PARENT/LEGAL GUARDIAN'S SIGNATURE

DATE

Minnesota Department of Public Safety Driver License/Criminal History Form

The Department of Public Safety requests the following information in order to determine if you have been convicted of crimes, which directly relate to the position you seek with the Department of Public Safety. The requested information is a continuation of the application process pursuant to Minnesota Statute. Your signature on this form authorizes the Department of Public Safety to request a search of your record for any driver license and criminal history.

While you are not required to provide this information, failure to do so may result in removing your name from consideration. The information requested below is private data by law. Your name, including any previous names and your date of birth are necessary to accurately access criminal history information. Although optional, you are requested to provide your gender and race/ethnicity to ensure that the records received are yours. Access to this information will be limited to individuals within the Department of Public Safety whose job duties reasonably require access and to any individuals to whom you provide written consent. Additionally, access to this information will be released without your consent as follows:

- to the Commissioner of Minnesota Management and Budget (Minn. Stat. Ch. 43A);
- to labor organizations, to the extent necessary to implement state law governing labor relations (Minn. Stat. §13.43);
- if required by court order; or
- authorized by other state or federal law.

Please provide us with the information requested below. Please Print.

 Last Name First Name Middle Name

List previous names used: _____ Date of Birth: _____

Race/Ethnicity: _____ Gender: _____

Have you been convicted of a felony, gross misdemeanor, or misdemeanors for which a jail sentence may have been imposed? Yes No

If yes, please use the reverse side to provide a complete chronology of your offense history. Include the type of offense, county, state, date and final disposition (i.e. jail time, fine, probation, etc.).

Driver License Number _____ State of Issue _____

I certify the above information to be true and accurate to the best of my knowledge. I understand that failure to disclose information or providing false information may subject me to the penalties of M.S. §43A.39.

Signature _____

Date _____

If applicant is under 18 years of age, a parent or guardian must sign

Date _____

MINNESOTA DEPARTMENT OF PUBLIC SAFETY

VOICE, VIDEO AND IMAGE RELEASE

INITIAL Publicity Clearance – Please initial one of the following:

I allow, without further obligation to me, the use of my name, city, state of residence, biographical material, voice, likeness or photograph by the State of Minnesota Department of Public Safety, for educational purposes, in connection with program publicity, and for on-air and other promotional purposes.

I will not allow the use of my name, city, state of residence, biographical material, voice, likeness or photograph by the State of Minnesota Department of Public Safety.

Publishing Clearance – Please initial one of the following:

I allow, without further obligation to me, Department of Public Safety a nonexclusive, royalty-free, irrevocable, world-wide license to reproduce and distribute, with or without charge, copies of the materials named below in hard copy, digital or any other format, including but not limited to distribution on the Internet, via CD-ROM and inclusion in electronic databases. I also authorize educational and non-profit entities to reproduce and distribute copies of the materials, without charge, to other employees of their agencies, educational service centers or offices, provided they include in the copies any credits, acknowledgments, copyright notice(s) and other such information contained in the materials. I retain all other rights in and to the materials including copyright therein.

Title of Materials: _____

I will not allow Department of Public Safety a nonexclusive, royalty-free, irrevocable, world-wide license to reproduce and distribute, with or without charge, copies of the materials named below in hard copy, digital or any other format, including but not limited to distribution on the Internet, via CD-ROM and inclusion in electronic databases. I retain all other rights in and to the materials including copyright therein.

Audio and Video Recording Clearance – Please initial one of the following:

I allow images or voice recordings created through photography, videography or other electronic means in which I appear to be edited, reproduced and distributed for unlimited use, in whole or in part, by the State of Minnesota Department of Public Safety, at its sole discretion.

I will not allow images or voice recordings created through photography, videography or other electronic means in which I appear to be edited, reproduced and distributed for unlimited use, in whole or in part, by the State of Minnesota Department of Public Safety.

I and my heirs, executors, administrators, assigns, and personal representatives agree to release and discharge the State of Minnesota Department of Public Safety, its directors, officers, employees and agents from any and all liability for any use, misappropriation or disclosure of any information, including, but not limited to, all claims for libel, slander, invasion of privacy or any other claim based upon the use by the State of Minnesota Department of Public Safety, of the above-described materials.

In signing this release, I acknowledge and represent that I have read this release, that I understand the significance of this release, and that I am signing this release voluntarily, as my own free act and deed. I further acknowledge and represent that no oral representations, statements, or inducements have been made, apart from the foregoing written release.

Signature

Date

Print Name

Address

For Minors (Participants under 18 years old)

I am the parent/guardian of the above minor and I fully intend this release to be binding on myself, my spouse, my family including, but not limited to, the minor who is the subject of this release, and/or my heirs, executors, administrators, assigns and personal representatives, with the exception that the State of Minnesota Department of Public Safety, will not publish the name of the minor who is the subject of this release.

Signature of Parent/Guardian

Date

Print Name

Address

EQUAL OPPORTUNITY EMPLOYER